

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091138

FILED  
Jul 10, 2006  
Secretary of State

**Entity Name:** TRAVERSO FAMILY MANAGEMENT COMPANY, LLC

**Current Principal Place of Business:**

2800 SOUTH OCEAN BOULEVARD  
APT. 3-F  
BOCA RATON, FL 33432 US

**New Principal Place of Business:**

**Current Mailing Address:**

2800 SOUTH OCEAN BOULEVARD  
APT. 3-F  
BOCA RATON, FL 33432 US

**New Mailing Address:**

FEI Number: 04-3829746      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

TRAVERSO, HELEN  
2800 SOUTH OCEAN BOULEVARD  
APT. 3-F  
BOCA RATON, FL 33432 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: TRAVERSO, HELEN  
Address: 2800 SOUTH OCEAN BOULEVARD, APT. 3-F  
City-St-Zip: BOCA RATON, FL 33432 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TRAVERSO, HELEN

MGRM

07/10/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date